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ABSTRACT

Voluntary survey responses of adolescents in corrections facilities (N=893) are compared to those of adolescents in public schools. Findings are highlighted in the following areas: (1) "Youth, Their Families and Their Environments," which includes sections on population description, family composition and relationships, family alcohol and drug problems, family violence, sexual abuse, date violence and rape, and multiple victimizations; (2) "Psychological Distress," which covers data on low self-esteem, emotional distress, and suicidal behavior and self-injury; (3) "Sexual Activity," which deals with rates of sexual activity, pregnancy, and condom use; (4) "School Perceptions and Behaviors," which reviews perceptions about school and learning problems; (5) "Antisocial and Illegal Behaviors," which includes reports on delinquent behavior, recent trends in substance use, cigarette use, alcohol and drug use prevalence, high-risk substance use, and consequences of substance use for the juvenile corrections population. Some survey results were more positive than might be expected; but very high rates of emotional distress, self-destructive behaviors, and environmental trauma were found. An executive summary, a summary of the findings, and recommendations are included. Eight specific recommendations are focused on reducing recidivism and returning youth to the community more prepared to cope with the adversities they confront. (Contains 34 references.) (EMK)

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ED 421 680

1995 Minnesota Student Survey

Juvenile Correctional Facilities

Minnesota Department of Human Services

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1995 Minnesota Student Survey

Juvenile Correctional Facilities

By

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Cover illustration by Kenneth Wurl

We would like to recognize the special contributions made by a number of individuals to this report and the ongoing Minnesota Student Survey projects. We sincerely thank Barbara Yates of the Minnesota Department of Children, Families and Learning for her vision, direction, and support of the Minnesota Student Survey over the years. We are indebted to Dean Zumach of the Minnesota Department of Children, Families and Learning for his tirelessness and congeniality in the coordination of the sites for data collection. The support of Richard D. Quick of the Minnesota Department of Corrections for the initial coordination of data collection was invaluable and we are very thankful for his assistance. We also thank the program staff at participating sites for administering the survey and attending to all the procedural details requested of them. We appreciate the creativity and the attention to detail demonstrated by Mitzi Nelson of the Department of Human Services in her graphic design of this report. Michael Luxenberg and Matthew Christenson of Professional Data Analysts have provided prompt and thorough data base management and consultation that we gratefully appreciate. We are also grateful to MaryKay Haas and Jim Colwell from the Department of Children, Families and Learning for their contributions to the Minnesota Student Survey. We also thank Anne Betzner, Ruthie Dallas, Carol Falkowski, Lee Gartner, and Steve Huot for their helpful suggestions in response to an earlier draft of this report. Last, but not least, we extend our sincerest thanks to all of the adolescents who participated in the survey. We appreciate their honesty and patience in completing the long survey.

Participating Sites

Anoka County Juvenile Detention Center, Circle Pines
Anoka County Juvenile Shelter Care, Circle Pines
Arrowhead Regional Juvenile Detention Center, Duluth
Boys Totem Town, St. Paul
Central Minnesota Regional Detention Center, Brainerd
Hennepin County Home School, Minnetonka
Hennepin County Juvenile Detention Center, Minneapolis
Mille Lacs Academy (Nexus), Inc., Onamia
Minnesota Correctional Facility, Red Wing
Minnesota Correctional Facility, Sauk Centre
Northwest Minnesota Juvenile Training Center, Bemidji
OK House, Inc., St. Cloud
PORT of Crow Wing County, Brainerd
Prairie Lakes Detention Center, Willmar
Ramsey County Juvenile Service Center, St. Paul
St. Croix Boys Camp, Sandstone
St. Croix Girls Camp, Sandstone
Thistledew Camp, Togo
West Central Regional Juvenile Center, Moorhead
Woodland Hills, Duluth

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This report highlights some of the findings that emerged when the Minnesota Student Survey was administered to 893 voluntary participants in juvenile correctional facilities in 1995. In order to get an accurate comparison with other youth, these adolescents were matched with adolescents of the same gender and age randomly selected from the public school student population who had completed the same survey about 6 months earlier.

Males outnumbered females about 4 to 1 in juvenile corrections settings, although the proportion of females increased since the survey was first conducted in these settings in 1991. Adolescents of color were overrepresented in corrections, particularly African American and American Indian youth. Adolescents in corrections were twice as likely as other youth to come from single-parent households and also more likely to have parents who never married or divorced, or to have a parent who is deceased.

Despite differences in family composition, adolescents in corrections were very similar to public school students with respect to their generally positive impressions of interpersonal relationships with family members. However, adolescents in corrections were more likely than public school students to say that their parents did not have many rules for them to follow.

Notable differences emerged in the rates of family alcohol and drug abuse problems. Rates of family substance abuse were 3 times higher for adolescents in corrections than for adolescents in public schools. Other key differences were rates of physical and sexual abuse. Adolescents in corrections were 3 times more likely than public school students to have been physically abused at home and 2½ times more likely to have witnessed the physical abuse of other family members. Sexual abuse by a family member was 2 times more common among females in corrections and 4 times more common among males in corrections than among female and male counterparts in public schools.

Sexual abuse by persons outside the family was 4 times more common among both females and males in corrections. Date rape and other date violence was also reported much more often by the adolescent corrections population, especially females.

Adolescents in corrections acknowledged markedly elevated levels of emotional distress, including pervasive feelings of sadness, anxiety, and a sense of hopelessness. Their rate of attempted suicide was 2½ times higher than that for public school students. In fact, half of the females and one-fourth of the males in corrections said that they had tried to kill themselves at some point in their lives.

Rates of sexual activity were also very high among the adolescent corrections population with 7 out of 8 reporting that they had had sexual intercourse. The adolescents in corrections also initiated sexual activity at a younger age than their counterparts in public schools and they were less likely to protect themselves from pregnancy and sexually transmitted diseases. One-third of females in juvenile corrections had been pregnant, a rate 8 times higher than that reported by females in public schools. Similarly, males in corrections were 8 times more likely than males in public schools to report that they had gotten a sexual partner pregnant.

Not surprisingly, antisocial behaviors were much more common among adolescents in corrections, including physical assaults, shoplifting, and vandalism. These adolescents were also much more likely than public school students to acknowledge gang involvement and to carry weapons when they attended school.

Substance use was extremely common among the juvenile corrections population. Adolescents in corrections were 4½ times more likely than public school students to smoke at least a pack of cigarettes a day. They were 1½ times more likely to use alcohol, 2 times more likely to use opiates, 3 times more likely to use marijuana and amphetamines, and 3½ to 5 times more likely to use other types of drugs. The use of multiple drugs also distinguished the corrections population from the student population. Adolescents in corrections were 5 times more likely to use at least 3 drugs than public school students.

Consequences of substance use were reported by large proportions of adolescents in corrections. Half reported several symptoms indicative of loss of control over use. For adolescents who used substances in the past year, the average number of adverse consequences of their substance use was 6, compared with an average of 2 for public school students.

The results of the survey of adolescents in corrections have implications for averting juvenile corrections placements. Clearly, earlier detection and effective interventions for children and families traumatized by physical and sexual abuse are essential. Improved access to professional assessments and services, for all families regardless of their financial resources, also would help to reduce the likelihood of serious behavioral problems among youth. Collaborative efforts now underway between county social service agencies, community mental health centers, and schools are an important step in this direction.

Survey results also suggest improvements to services for adolescents in the correctional system which may reduce recidivism and return youth to the community more prepared to cope with the adversities they confront. Specific recommendations include:

- Make substance abuse assessment and treatment available for all juvenile offenders.
- Include assessments of sexual and physical abuse and psychological problems for all juvenile offenders, with mental health care available as needed.
- Include therapeutic services that address the perceived benefits of gang involvement, and develop release plans to incorporate safer and healthier alternatives for meeting adolescent needs for connectedness and physical and emotional safety.
- Include therapeutic services to address responsible sexual behavior.
- Provide referrals for assessments of parental substance abuse problems.
- Ensure that all services for adolescents in corrections are sensitive and responsive to diverse cultural backgrounds and differing developmental needs of males and females.

Admissions to juvenile correctional facilities

Based on data collected by the Minnesota Department of Corrections and prepared by the Criminal Justice Center at Minnesota Planning, there were 13,406 admissions to the juvenile corrections system in 1994, the last year for which complete data are available. Correctional group foster homes and 24-hour temporary holdover facilities were not included in these admissions.

The number of admissions in a given year is higher than the number of individuals who are detained or incarcerated since a transfer from a detention center to a residential facility is counted as two admissions, and some juveniles have more than one admission to detention centers or residential facilities in the same year. Detention center admissions totaled 9,894 or 74% of the total admissions. Residential facility admissions totaled 3,512 (26% of the total). Males comprised 82% and females 18% of the admissions to both detention centers and residential facilities.

Adolescents in correctional facilities are awaiting court action, have been sentenced, or reside in custody services. The length of stay in these programs varies greatly. Most youth in detention centers remain for about two weeks or less. The average length of stay in a residential facility is about five months. Offenses which result in detention or incarceration range from relatively minor offenses such as probation violations up to more serious offenses such as auto theft, burglary, assault, sex offenses, and weapons offenses.

Survey administration

The Minnesota Student Survey was designed to elicit important information about adolescents from adolescents themselves. The survey included a variety of questions about their backgrounds, families, and schools, as well as about their feelings and behaviors. The Minnesota Student Survey was administered to public school students in 1989, 1992, and 1995 and to adolescents in special settings such as correctional facilities in 1991 and 1995. Participation in the survey was voluntary and all surveys were completed anonymously.

In 1995, adolescents from all 20 juvenile correctional facilities (detention centers and residential facilities) licensed by the Minnesota Department of Corrections participated in the survey. (Correctional group foster homes and 24-hour temporary holdover facilities were not included.) All the facilities were operated by the Minnesota Department of Corrections or by individual counties. Four of the facilities are located in the Minneapolis-St. Paul metropolitan area; the others are located throughout the state.

Juvenile corrections survey participation was much more inclusive in 1995 than in 1991 in terms of both participating facilities and number of adolescents. In 1991 only 12 facilities and 461 adolescents participated.[1]

During the 1995 survey period, 986 adolescents were in correctional facilities. Only 24 adolescents (2%) refused to participate in the survey. An additional 25 adolescents (2%) were unable to participate due to conflicting activities. Of the 937 surveys completed, 893 (95%) were used for analyses in this report. The remainder were excluded because of inconsistent responses or failure to complete essential items such as gender or age. The proportion of males (83%) and females (17%) who completed the survey is almost identical to the gender breakdown of 1994 juvenile corrections admissions.

Matching adolescents in corrections with public school students

This report compares the 1995 survey responses of adolescents in corrections with adolescents in the public schools. Each adolescent in the 1995 corrections survey population was randomly matched by age and gender with a public school student from the 1995 student survey population. This matching procedure ensures that differences found between the two groups are not the result of age or gender differences.

One difference between the two adolescent survey groups remains, however. The corrections adolescents took the survey about 6 months later than the public school students. Therefore, it is possible that some differences between the two groups might result from the time difference. For example, since drug use increased among students in Minnesota between 1992 and 1995,[2] a higher rate of drug use among adolescents in corrections than among students could conceivably be the difference between two different points in time. While this possibility cannot be dismissed, most of the differences found were much too large to be attributed to the 6 months that elapsed between the survey administrations. Furthermore, for many adolescent behaviors and environmental events, changes over time were almost negligible.

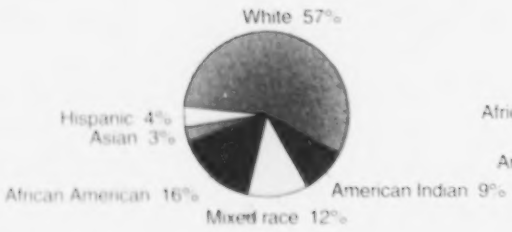
The title of the juvenile correctional facilities sample has been shortened to "Corrections" in many places in this report for ease in reading the text, tables, and graphs. Also for ease of presentation, percentages used in this report have been rounded to whole numbers. For a few tables and pie charts, this results in a total of 99% or 101% instead of 100%.

Population description

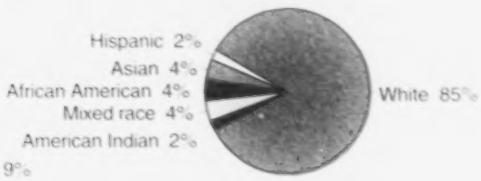
Adolescent males predominated in juvenile correctional settings (83%). Although there were fewer females in corrections, the female adolescents were younger than the males (60% versus 35% younger than 16, respectively). Three-fourths of the adolescents in these settings were 15 to 17 years old, with 16% younger than 15 and 9% 18 to 20 years old.

Disproportionately large numbers of adolescents of color were seen in the juvenile corrections system, a finding true for all minority groups except Asian Americans. Placement rates were 4 times higher than would be expected based on general population figures for American Indians and African Americans, 2 times higher for Hispanics, and 3 times higher for adolescents of biracial or multiracial heritage. Females in corrections were more likely to be Caucasian or of biracial/multiracial heritage than males.

	Number	%
Sex		
Females	156	17
Males	737	83
Age		
12	12	1
13	29	3
14	103	12
15	211	24
16	233	26
17	229	26
18-20	76	9



Corrections

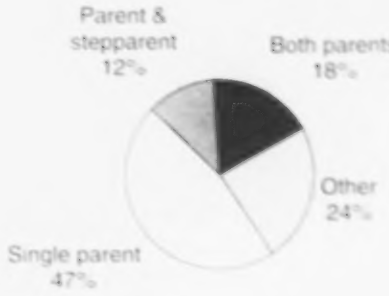


Public schools

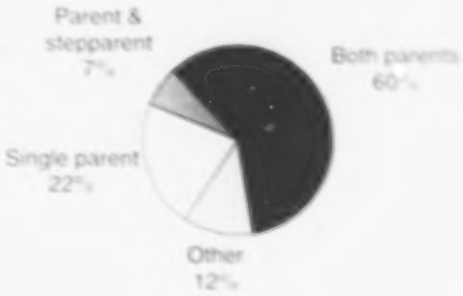
Family composition/relationships

Adolescents in corrections were much less likely to come from two-parent homes than adolescents in the public school population. In fact, students in the public school population were more than 3 times as likely to be living with both biological or adoptive parents as adolescents in corrections. Adolescents in corrections were more than twice as likely as students in public schools to live with single parents, other relatives, or non-relatives. Many more of the adolescents in corrections had parents who never married, who divorced, or who were deceased.

Despite the large differences in family composition between adolescents in corrections and students in public schools, differences in perceptions about interpersonal family relationships were relatively small. A very large proportion of both groups of adolescents believed that their parents care about them "quite a bit" or "very much," with the percentage somewhat higher for the student population. However, adolescents in corrections were more likely than the public school students to give positive responses to questions about whether their families cared about their feelings, understood them, respected their privacy, or had fun together.



Corrections



Public schools

How much do you feel... *(Quite a bit or very much)*	Corrections %	Public schools %
Your parents care about you?	83	89
Your family cares about your feelings?	73	66
Your family understands you?	52	48
Your family respects your privacy?	61	55
Your family has lots of fun together?	45	40

These comparatively positive assessments of family interactions seem inconsistent with the high rates of family problems reported by adolescents in corrections (and described in the following pages). One possibility is that the parent or other family member who caused serious problems is no longer a member of the household and the adolescent recognizes the strengths of the remaining parent and family members. Another possibility is that, in a dysfunctional environment, the adolescent has abnormal standards of healthy family functioning.

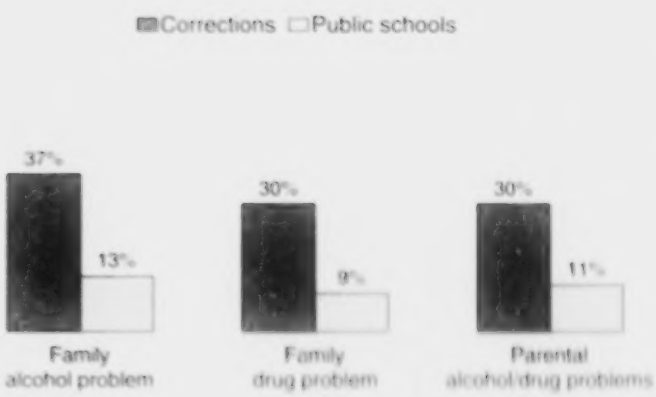
Consistent with their positive family perceptions, adolescents in corrections were more likely than adolescents in public schools to say that they could talk about their problems with their mothers "most of the time." Excluding those whose fathers were "not around," adolescents in corrections were equally likely to talk about problems with their fathers as adolescents in public schools.

Adolescents were also asked about rules in their household. When parents had rules, adolescents in corrections did not differ much from those in public schools in their perceptions of whether the rules were fair or strict, or whether their parents followed through with consequences when the rules were broken. However, 25% of adolescents in corrections responded that their parents did not have many rules compared to 16% of adolescents in public schools. This higher level of permissiveness increased the chances of severe antisocial problems.

Family alcohol/drug problems

Adolescents in corrections were approximately 3 times more likely than public school students to report alcohol and drug problems in their families. They were asked, "Has alcohol use by any family member repeatedly caused family, health, job, or legal problems?" followed by a similar question for drug use. When the responses for alcohol and drug problems were combined, but limited to adolescent assessment of their parents, the difference was also notable: adolescents in corrections were almost 3 times more likely than students to report that a parent had an alcohol or drug problem.

In the corrections population, parental substance abuse was associated with physical and sexual abuse and substance abuse problems in the adolescent. However, adolescent substance abuse was more strongly related to physical and sexual abuse victimization than it was to parental substance abuse.

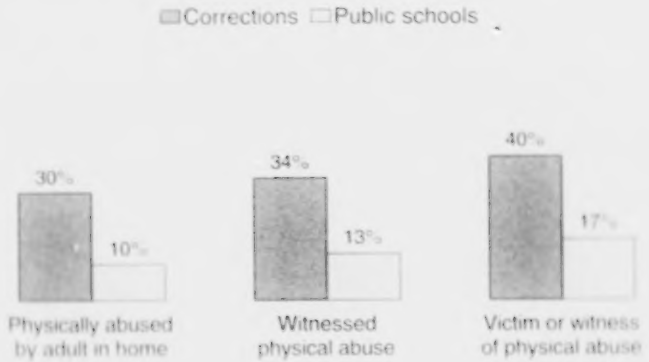


Family violence

The survey included two questions about family violence: "Has any adult in your household ever hit you so hard or so often that you had marks or were afraid of that person?" and "Has anyone in your family ever hit anyone else in the family so hard or so often that they had marks or were afraid of that person?" A yes response to the first question was considered physical abuse and a yes response to the second question was considered witnessing physical abuse.

Adolescents in corrections were 3 times more likely than public school students to have been physically abused in the home, and over 2½ times more likely to have witnessed other family members being physically abused. Considering both aspects of family violence means that two out of five adolescents in corrections have either been physically abused, witnessed such abuse, or both.

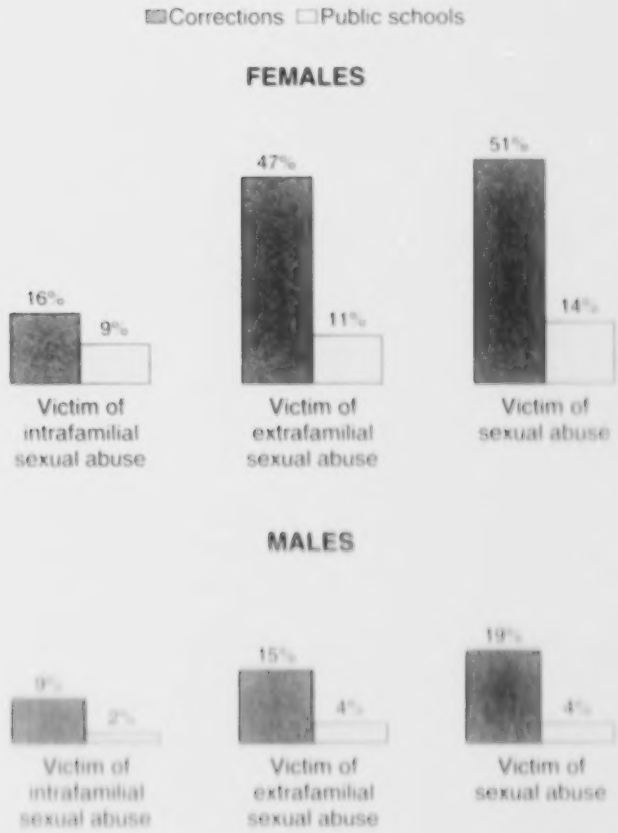
Family violence was associated with severe self-esteem problems among adolescents in corrections as well as an increased likelihood of sexual abuse by a non-family member.



Sexual abuse

Adolescents in corrections were much more likely to report histories of sexual abuse than students in public schools. The survey asked, "Has any older or stronger member of your family ever touched you sexually or had you touch them sexually?" and "Has any adult or older person outside the family ever touched you sexually against your wishes or forced you to touch them sexually?" Intrafamilial (within the family) sexual abuse was almost 2 times more likely to be reported by females in corrections than by females in public schools, and 4 times more likely to be reported by males in corrections than by males in public schools. Extrafamilial (outside the family) sexual abuse was approximately 4 times more likely to be reported by both females and males in corrections than by their public school counterparts. Considering both types of sexual abuse reveals that half the females in corrections had experienced sexual abuse compared with one in five males.

A history of sexual abuse was associated with suicide attempts, self-esteem and emotional health problems, and an increased risk for date rape among adolescents in corrections. In addition, many victims of sexual abuse in the corrections population did not feel that their families cared about them.



Date violence and rape

Survey questions also asked about date violence and date rape (which are not included in the definitions of physical and sexual abuse used in this report). The questions asked, "Have you ever been the victim of violence on a date?" and "Have you ever been the victim of date rape?" Females in corrections were much more likely than females in public schools to report date violence (4 times higher) and date rape (almost 6 times higher). Males in corrections were 2½ times more likely than males in public schools to report being a victim of date violence. Being a victim of date rape was reported by only a small and equivalent percentage of both male populations, however.

Both date violence and rape were reported much more frequently by females than males in corrections. Many individuals who reported date violence also reported date rape. Date violence and rape were often associated with severe emotional health and self-esteem problems, suicide attempts, antisocial problems, and multiple drug use among the adolescents in corrections.

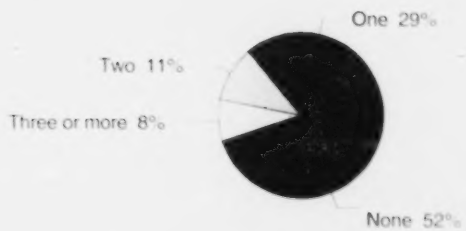
Multiple victimizations

To examine differences in multiple experiences of abuse, five measures of victimization were considered: intrafamilial sexual abuse, extrafamilial sexual abuse, intrafamilial physical abuse, date violence, and date rape. The proportions that reported two or more of these experiences included 19% of the corrections adolescents compared with only 5% of the public school students.

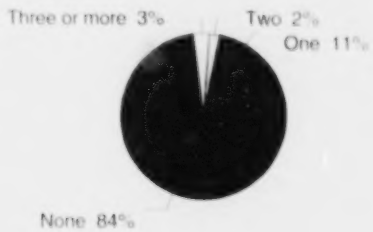
Further analyses showed that a history of physical abuse within the home was associated with a higher risk of date violence and date rape for both females and males. A history of sexual abuse within or outside the home also was associated with a higher risk of date violence and date rape. These findings indicate that childhood abuse greatly increases the vulnerability of adolescents to repeated victimization.

Differences between the two survey populations were even more apparent when the threshold was three victimization experiences and genders were examined separately. This high level of victimization was reported by 4% of males in corrections compared with 2% of male students, and 27% of females in corrections compared with 5% of female students.

Adolescents who were victims of multiple abusive experiences were very vulnerable to a host of other problems. These individuals were likely to have severe self-esteem and emotional health problems, more likely to have attempted suicide, more likely to be multiple drug users, and more likely to have antisocial problems than non-victims. These associations increased with the number of victimization experiences so that adolescents who were physically and sexually abused had many more problems than individuals who experienced only one of these traumatic events.



Corrections



Public schools

Low self-esteem

For some measures of low self-esteem, differences between adolescents in corrections and adolescents in public schools were almost negligible; for others they were notable. Adolescents in corrections were about as likely as their counterparts in public schools to believe they are able to do things as well as their peers and to usually feel good about themselves. They were somewhat less likely to be satisfied with themselves and they were more likely to feel that they can't do anything right, to believe that they don't have much to be proud of, to feel that their lives are not very useful, and to sometimes think that they are no good. Despite the differences, only a fairly small minority of either population had generally negative opinions about themselves.

Even though only a small number of adolescents in corrections had severe self-esteem problems, these individuals were very likely to have been victims of physical and sexual abuse and to have attempted suicide. Not surprisingly, these individuals tended to report emotional health problems as well. They were more likely to feel that their families did not care about them than adolescents with higher self-esteem. Also, perhaps in an attempt to reduce their pain, these adolescents were likely to use at least three different drugs.

	Corrections %	Public schools %
I am able to do things as well as most other people (Disagree)	9	8
I usually feel good about myself (Disagree)	15	13
On the whole, I'm satisfied with myself (Disagree)	18	12
I feel like I can't do anything right (Agree)	23	16
I feel I do not have much to be proud of (Agree)	28	20
I feel that my life is not very useful (Agree)	25	16
Sometimes I think that I am no good (Agree)	34	25

Emotional distress

In contrast to rather moderate differences in low self-esteem, differences between adolescents in corrections and adolescents in public schools with respect to measures of emotional distress were quite pronounced. The survey asked a variety of questions about mood states for the previous 30-day period. Adolescents in corrections were 3 times more likely than their counterparts in public schools to report pervasive feelings of sadness, 2½ times more likely to report bad moods, about 2 times more likely to be nervous, worried, or upset, 2 times more likely to be discouraged or hopeless, and at least 1½ times more likely to be dissatisfied with their personal lives and feeling under great stress.

Adolescents in corrections with severe emotional health problems were more likely to have been sexually abused or raped by a date than individuals without emotional health problems. It is apparent that sexual exploitation has a profound impact on emotional well-being.

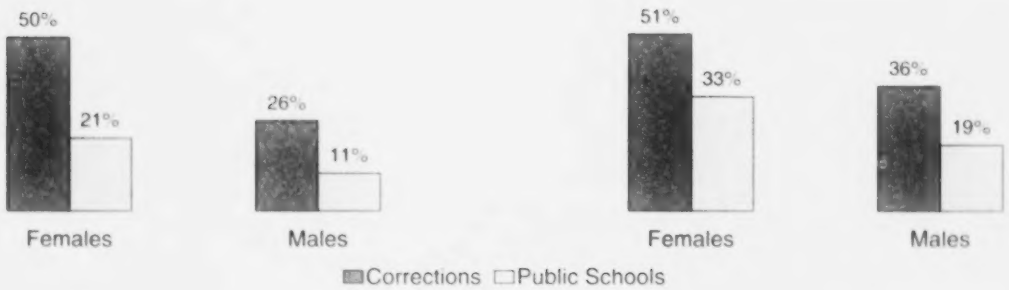
	Corrections %	Public schools %
During the past 30 days...		
Have you felt sad? (All or most of the time)	29	10
How has your mood been? (Bad or very bad)	15	6
Have you felt nervous, worried, or upset? (All or most of the time)	33	14
Have you felt so discouraged or hopeless that you wondered if anything was worthwhile? (Extremely or quite a bit)	27	14
Have you felt satisfied with your personal life? (Somewhat or very dissatisfied)	32	18
Have you felt you were under any stress or pressure? (Quite a bit or almost more than I could take)	47	32

Suicidal behavior and self-injury

Consistent with their elevated rates of emotional distress, more adolescents in corrections reported suicidal thoughts in the previous month than adolescents in public schools (32% versus 23%). The difference in lifetime suicide attempts, however, was much greater than for recent suicidal ideation. Both females and males in the corrections population were almost 2½ times more likely than their public school counterparts to report that they had tried to kill themselves. In fact, half of the females and one-fourth of the males in corrections said they had attempted suicide. This history suggests that the recent emotional distress they reported was probably not attributable merely to transient feelings associated with their current incarceration.

Adolescents were also asked whether, during the previous 12 months, they had ever hurt themselves on purpose (such as by cutting or burning themselves). Females in corrections were 1½ times more likely than females in public schools to report deliberate self-injury. The difference was even greater for males; males in corrections were almost 2 times more likely than males in public schools to report deliberate self-injury.

The high rates of suicide attempt and self-injury observed among the corrections population are consistent with the high rates of physical and sexual abuse reported by these adolescents. Not surprisingly, these adolescents also have significant self-esteem and emotional health problems, and feel that their families do not care about them.



Adolescents in corrections were much more likely than their counterparts in public schools to have had sexual intercourse, and the difference was more pronounced for females. Despite their young age, 7 out of 8 males and females in corrections said they had had sexual intercourse. In contrast, fewer than half of the males and fewer than one-third of the females in public schools reported having had sexual intercourse.

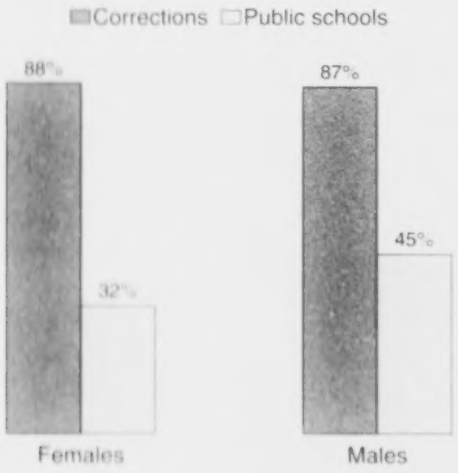
Among the sexually active adolescents, adolescents in corrections were more likely to have started sexual activity at a younger age, with 86% of the sexually active adolescents in corrections saying that their first experience had occurred by age 14 compared with 53% of the sexually active adolescents in public schools.

With respect to both the high rate of sexual activity and the early age of initiation into sex among adolescents in corrections, it is important to note that such sexual activity may not have been voluntary. It is possible that, for many adolescents, their first sexual experience was coerced since half of the females and one out of five males said they had been sexually abused.

Sexually active adolescents in corrections also were less likely than their counterparts in public schools to report using protection against pregnancy and/or sexually transmitted diseases the last time they had sexual intercourse. Condoms were the most commonly reported method of protection, used by 53% of the sexually active adolescents in corrections compared with 70% of the sexually active adolescents in public schools. Birth control pills (alone or in combination with condoms) were used by 20% of the sexually active adolescents in corrections compared with 26% of the sexually active adolescents in public schools. The lower rate of protection against pregnancy and/or sexually transmitted diseases for adolescents in corrections was also reflected in the higher number of sexually active adolescents with sexually transmitted diseases (10% versus 4% of public school students).

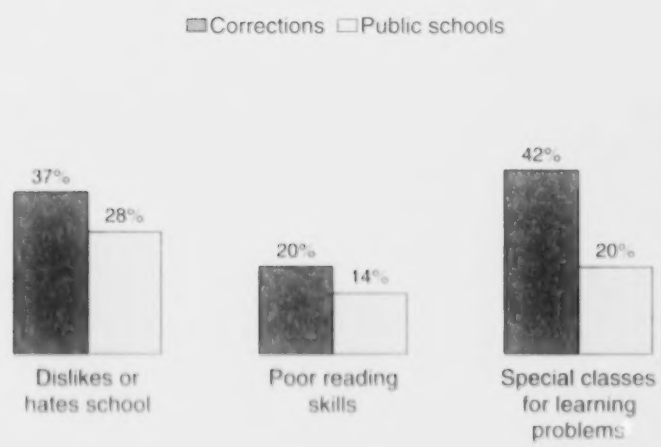
The pregnancy rate of females and the proportion of males who got a sexual partner pregnant was 8 times higher in the corrections population than in public schools. Thirty-three percent of adolescent females in corrections have been pregnant compared with 4% of females in public schools. Similarly, 32% of adolescent males in corrections reported having gotten a sexual partner pregnant compared with 4% of adolescent males in public schools.

Many of the adolescents in corrections who have gotten pregnant, or gotten a sexual partner pregnant, have used birth control pills for recent sexual activity. However, the use of condoms did not increase after pregnancy, leaving these adolescents at continued risk for sexually transmitted diseases.



Adolescents in corrections were more likely than adolescents in public schools to say that they dislike or hate school, although the difference between the two groups was not large. In fact, most adolescents in both groups said that they planned to finish high school or go on to post-secondary education; only 10% of adolescents in corrections compared with 3% of adolescents in public schools said that they would like to quit school as soon as they can.

More adolescents in corrections than in public schools also said that their reading skills had prevented them from keeping up with classwork, but the proportions in both groups were relatively small. The largest difference between the two groups of adolescents was in the proportion reporting that they had been in special classes for learning problems. When compared to adolescents in public schools, more than twice as many adolescents in corrections reported such special class placement.

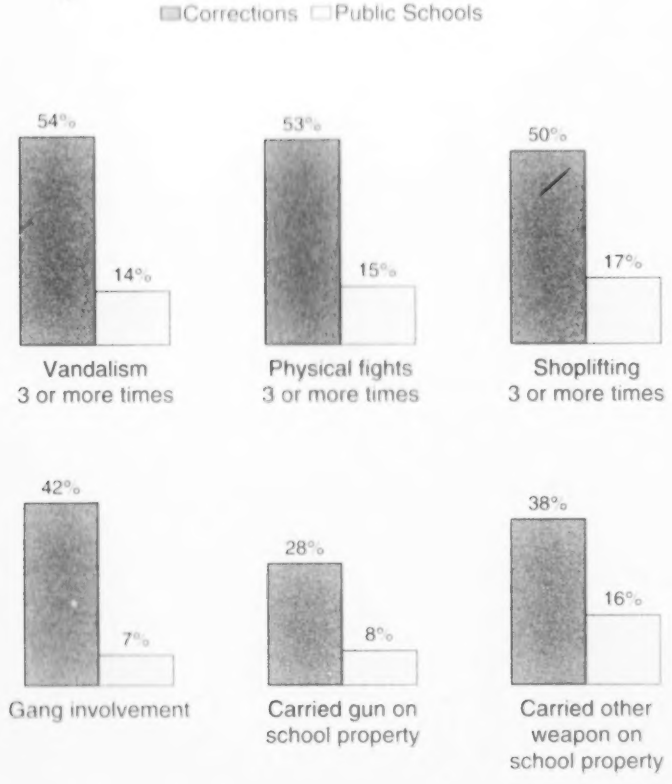


Delinquent behavior

Consistent with their current placement, adolescents in correctional settings were much more likely than their counterparts in public schools to report antisocial behaviors during the previous 12 months. Acts of vandalism, hitting or beating someone up, and shoplifting at least 3 times in the previous year were reported by at least half of the adolescents in corrections. These rates were roughly 3 times higher than those for adolescents in public schools. Adolescents in corrections also were much more likely to say that they get a "kick" out of doing dangerous things than adolescents in public schools (55% versus 34%).

Even more dangerous behavioral indicators distinguished the two groups of adolescents. Adolescents in corrections were much more likely than adolescents in public schools to report spending time in a gang, to say that they have carried a gun on school property, and to have carried weapons other than guns on school property. Whereas males in corrections were more likely to carry guns and other weapons than females in corrections, the gender difference was much greater for guns than other weapons. Males were also more likely to be involved in a gang whereas females were more likely to have friends in a gang.

The high rates of antisocial behavior reported by adolescents in corrections were associated with reports of family dysfunction. Antisocial behaviors were strongly related to a perception of a non-caring family.



Recent trends in substance use

Substance use among adolescents is of heightened interest recently because of increases in the use of cigarettes, marijuana, LSD, and other drugs reported in a variety of national studies.[3,4] Overall, the trends in Minnesota have mirrored those reported nationally, as shown in the comparison of Minnesota Student Survey results from 1989, 1992, and 1995.[2]

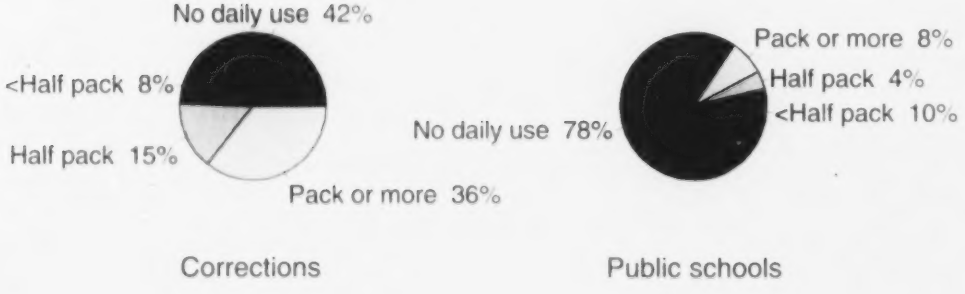
Although the focus of this report is the comparison between Minnesota adolescents in corrections and Minnesota public school students, the recent national and state trends provide a helpful context for evaluating the magnitude of the differences found between these groups of young people.

The national prevalence of cigarette smoking has steadily increased since 1992 among adolescents of all ages.[5] Minnesota smoking rates among adolescents have also increased and are actually higher than national rates.[2]

Nationally, alcohol use among adolescents declined from the 1980s through 1993 and then leveled off.[3] In Minnesota, the declines in alcohol use continued through 1995, and the Minnesota rate of alcohol use among adolescents was lower than the national rate. Trends for marijuana were markedly different, however. Marijuana use increased dramatically between 1992 and 1995 both nationally[1] and in Minnesota,[2] but the state rates remained lower than the national rates. National surveys have also shown increases in other drugs, such as LSD and cocaine.[3] Even with the recent increases, the overall prevalence rates for drugs other than marijuana remained relatively low in 1995. All drug use rates were well below peak levels seen in the late 1970s and early 1980s. Minnesota adolescent drug use rates were lower than national rates in 1995 for inhalants, LSD and other hallucinogens, cocaine, and opiates, but higher for amphetamines.[2]

Cigarette use

Adolescents in corrections were much more likely to smoke cigarettes on a daily basis than adolescents in public schools (58% versus 22%). The difference between the two groups of adolescents was even more pronounced for heavy smoking (at least a pack a day). Adolescents in corrections were 4½ times more likely to smoke heavily than adolescents in public schools.

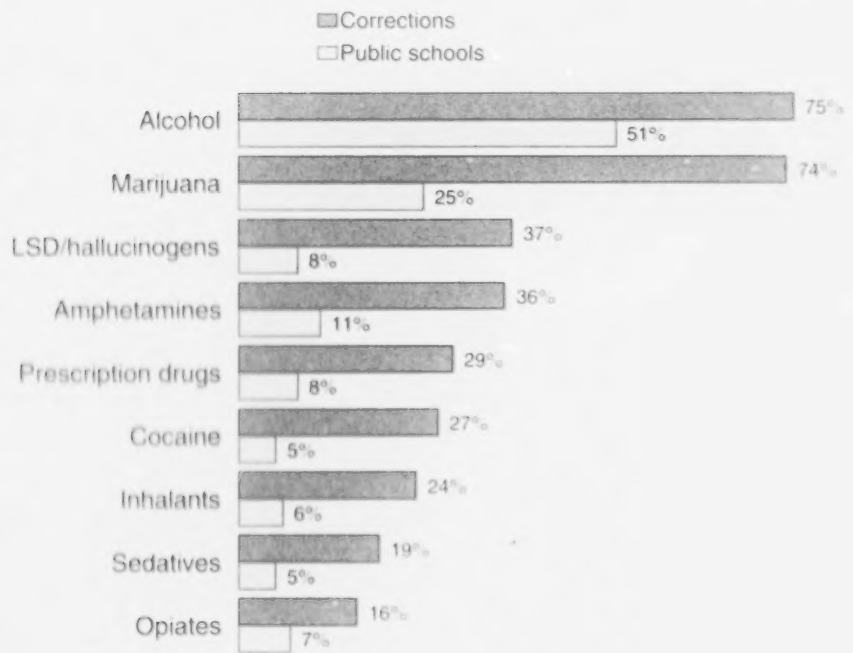


Alcohol and drug use prevalence

Adolescents in corrections were much more likely than adolescents in public schools to report the use of every substance inquired about in the survey, and they also were more likely to initiate substance use at an earlier age. Alcohol and marijuana were the two most commonly used substances by adolescents in both groups, followed by LSD and other hallucinogens, amphetamines, and other people's prescription drugs. Opiates, sedatives, inhalants, and cocaine were the least commonly reported drugs for both groups.

Examining reports of use during the previous 12 months revealed that the proportional differences between adolescent in corrections and public school students were smallest for alcohol; approximately 1½ times more adolescents in corrections than adolescents in public schools used alcohol. For all other substances, the differences in the proportions of users between the groups were much larger. Adolescents in corrections were more than 2 times more likely to use opiates, 3 times more likely to use marijuana and amphetamines, 3½ times more likely to use other people's prescription drugs, about 4 times more likely to use sedatives and inhalants, 4½ times more likely to use LSD or other hallucinogens, and more than 5 times more likely to use cocaine.

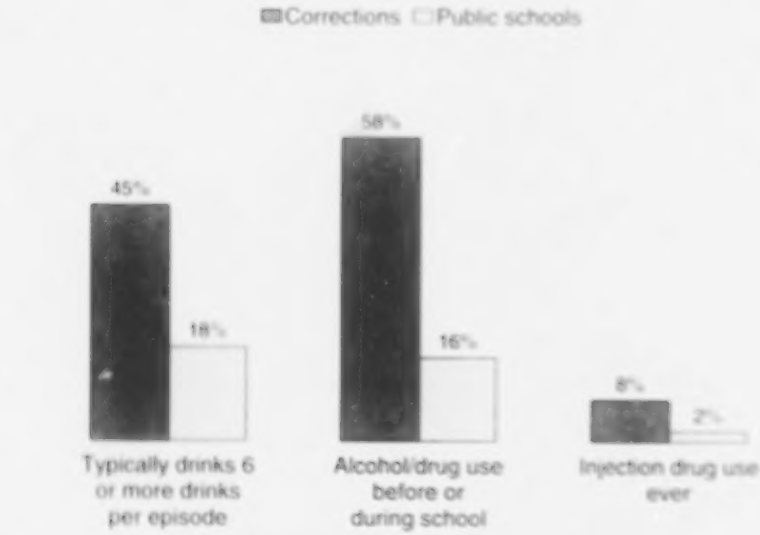
The higher rates of substance use prevalence reported by adolescents in corrections are associated with higher levels of other antisocial activity, being a victim of violence, emotional health and self-esteem problems, sexual activity, suicide attempts, and family dysfunction.

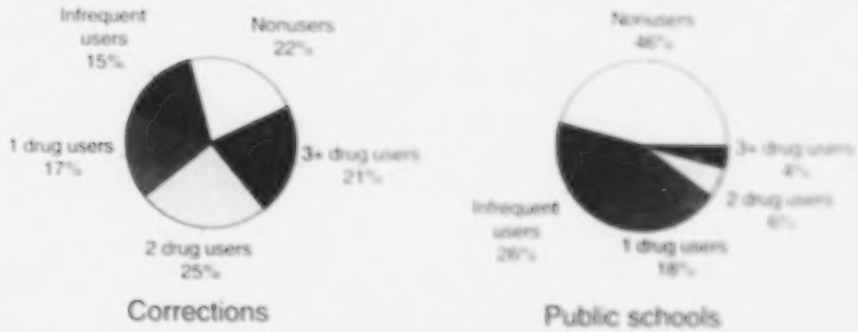


High-risk substance use

In addition to higher overall substance use, adolescents in corrections engaged in more dangerous drinking and drug use behaviors than their public school counterparts. They were 2½ times more likely to drink at least six drinks when they drank, 3½ times more likely to use alcohol or drugs before or during school, and 4 times more likely to have injected drugs, a very risky behavior, especially in light of possible HIV transmission.

To illustrate differences in the use of multiple drugs, a hierarchy of substance use was created based on use in the past 12 months. Adolescents who had not used any substances in the past 12 months were classified as nonusers. Adolescents who did not use any drug more than 9 times were classified as infrequent users. Those who used only one substance 10 or more times were classified as 1-drug users and those who used two substances 10 or more times each were classified as 2-drug users. The most severe pattern was the use of at least three drugs 10 or more times each; adolescents with this pattern were classified as 3-or-more-drug users. Adolescents in corrections were 4 times more likely than adolescents in public schools to be 2-drug users and 5 times more likely to be 3-or-more-drug-users.

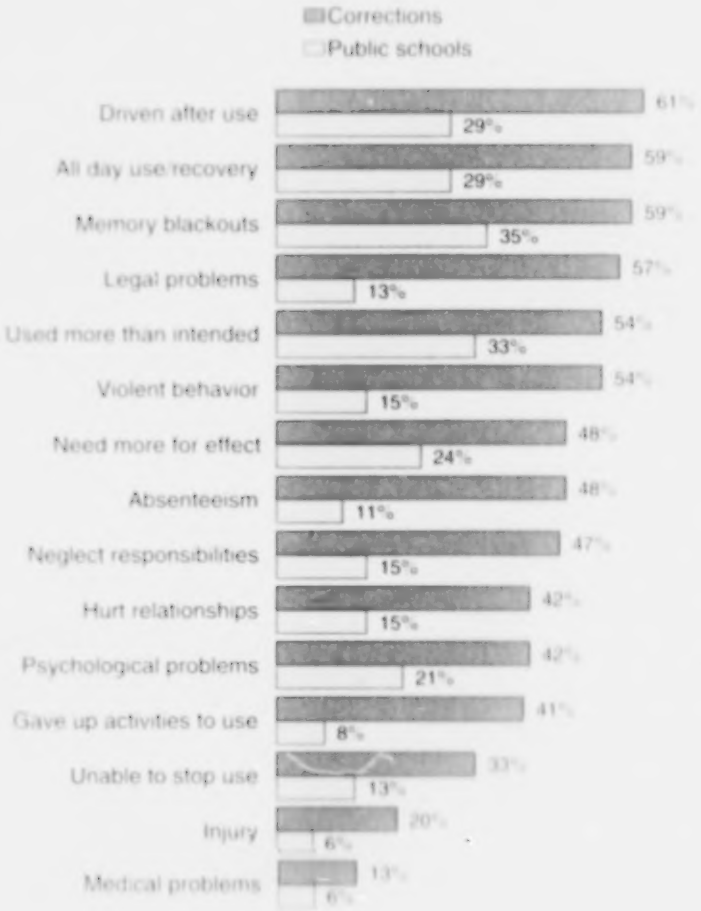




Consequences of substance use

Consistent with their higher levels of substance use, adolescents in corrections also reported many more adverse consequences of their use in the past 12 months than public school students. The average number of consequences of use reported by adolescents in corrections who used during the past year was 6.2 compared with 2.3 for the adolescents in public schools.

More than half of the substance-using adolescents in corrections reported indications of impaired control over substance use: needing more to get an effect, using more than intended, memory blackouts, and spending an entire day using or recovering from the effects of use. In addition, approximately half reported social or vocational impairments, such as legal problems related to their use, driving after use, violent behavior while using, job or school absenteeism, and neglect of responsibilities. The symptom profile among adolescents in corrections suggests that the majority of substance users in this setting need assessments and possibly treatment for substance abuse or dependence.



In 1995 more juvenile corrections sites participated in the Minnesota Student Survey than in 1991,[1] and the number of adolescents participating was also greater. The high participation rate for the 1995 survey assured that the 1995 sample was representative of the juvenile corrections population as a whole.

Comparing the results of the 1995 and 1991 corrections surveys reveals very consistent results. Family composition, reports of family violence and sexual abuse, and rates of sexual activity and previous pregnancies were virtually unchanged. The proportion of adolescents of color stayed about the same (43% in 1995 and 45% in 1991). Adolescents in corrections were slightly younger in 1995 with 40% under age 16 compared with 32% in 1991. The 1995 survey sample also included a larger proportion of females (17% versus 9% in 1991).

In 1995, fewer adolescents in juvenile corrections reported family alcohol and drug problems and suicide attempts than in 1991; however, more reported vandalism and shoplifting. While the prevalence of alcohol and inhalant use remained about the same for the two survey years, the prevalence of marijuana, cocaine, and amphetamine use increased in 1995, mirroring trends seen among adolescents in Minnesota and throughout the United States.[2-4]

To establish a context for evaluating the level of problems among adolescents in corrections, each 1995 corrections survey participant was matched with a public school student of the same gender and age who participated in the statewide 1995 survey. The comparisons revealed that the 1995 juvenile corrections population differed from the general student population on many dimensions:

- Correctional settings included a disproportionate number of adolescents of color and adolescents from single-parent homes.

- Adolescents in corrections were much more likely than students in public schools to have witnessed physical violence within their homes, or be victims of physical or sexual violence within or outside of their homes.

- Familial rates of alcohol and drug abuse were about three times higher among adolescents in corrections than among students in public schools.

- Adolescents in corrections were much more likely than students in public schools to report psychological distress, suicide attempts and deliberate self-injury.

- The rate of sexual activity among adolescents in corrections was twice as high as the rate among public school students. One-third of the females in juvenile corrections had been pregnant and one-third of the males had gotten a sexual partner pregnant. Despite high rates of previous pregnancies and sexually transmitted diseases, many adolescents in correctional facilities did not use condoms or other protection during recent sexual intercourse.

- High rates of antisocial acts such as vandalism, fighting, and shoplifting were anticipated among adolescents in juvenile corrections. Of greater concern were the percent-

ages of adolescents in corrections who reported being involved with gangs and carrying weapons to school. Nearly half of the adolescents in corrections reported some involvement in a gang.

- Substance abuse rates were greatly elevated among adolescents in corrections. They were 3 to 5 times more likely than students to use drugs such as marijuana, LSD, amphetamines, cocaine, inhalants, and sedatives. Adolescents in corrections also reported more harmful consequences of their substance abuse such as drinking and driving and violent behavior.

Some survey results may run counter to common public perceptions in that they were generally positive for adolescents in corrections. With respect to self-esteem, adolescents in corrections were roughly comparable to students in public schools, and they generally gave their families high marks for caring about and understanding them. More adolescents in corrections than students reported good communication with their mothers. More also acknowledged, however, fewer rules in the household, a permissiveness that was associated with higher levels of antisocial behavior among adolescents.

Behavior problems are obviously the catalyst for juvenile corrections placements. The survey does not address the specific actions which resulted in detention or incarceration, so it likely underestimates the true extent of differences between the corrections population and the student population in terms of violence and criminal behaviors. However, it is not merely the differences in antisocial and illegal behaviors between adolescents in corrections and public school students which are striking. What may be unexpected are the very high rates of emotional distress and self-destructive behaviors which accompany the acting out behaviors among adolescents in corrections. Moreover, many of these youth have encountered a great deal of trauma in their environments.

The profile of adolescents in correctional facilities depicts vividly the constellation of family and environmental risk factors, and problem behaviors or psychological distress among adolescents. Family risk factors included violence, sexual abuse, parental substance abuse, and adolescents' perception that parents and other family members do not care very much about them. Environmental risk factors included sexual abuse outside the home, date rape, and date violence. Adolescent problem behavior included substance abuse and other antisocial or violent behavior, high-risk sexual behavior, deliberate self-injury, and suicide attempts. Psychological distress included low self-esteem and emotional distress such as depression and anxiety.

Family risk factors were often interrelated, with many adolescents reporting more than one of these risk factors. The same was true of environmental risk factors. Adolescents' risk behaviors were also associated with one another and with psychological distress, meaning that reports of any particular behavioral or psychological problem was associated with an increased likelihood of other problems. The family and environmental risk factors were also significantly associated with the adolescent's behavior and psychological problems.

The meaningful relationships between risk factors and adolescent problems found in the survey of the juvenile corrections population are not only consistent with earlier survey findings of adolescents in public schools,[8,9] they are also consistent with clinical research and other epidemiological studies. Family factors have been consistently implicated in adolescent delinquency, substance abuse, and mental health problems.[9,10] Poor parent-

child relationships, neglect, lack of warmth and affection, and inconsistent discipline have been found to be related to low self-esteem, depression, and substance abuse among adolescents.[12-15] Parental substance abuse also has been found to be associated with increased levels of family violence in the homes of juvenile offenders.[16]

Childhood sexual abuse consistently has been found to be associated with low self-esteem, anxiety and depression, self-injury, and suicide attempts.[17-23] Sexual abuse often leads to anger, hostility, distrust of others, and the inability to establish intimacy, particularly when the abuser was a parent or trusted caregiver, causing serious problems in interpersonal relationships.[17-19,22] Sexual abuse leads to overt behavioral problems as well, including truancy and other school problems, delinquency, running away, prostitution, and substance abuse.[11,20,23-27] Childhood physical abuse is similarly associated with a range of negative effects including aggressive and violent behavior, low self-esteem, difficulty in establishing relationships, self-destructive behaviors, and psychiatric illness.[11,20,28] Witnessing family violence may have similar negative outcomes.[29]

The relationships among the variety of risk factors and problem behaviors examined in the survey of juvenile corrections are complex. For example, sexual and physical abuse can lead to repeated victimization when young people who run away from abuse at home become vulnerable to more abuse on the streets. Adolescents may use alcohol and other drugs in an attempt to alleviate the distress associated with abusive experiences, but substance abuse may in fact increase their exposure to the risk of rape and violence. Moreover, substance abuse often worsens feelings of depression and anxiety, and is associated with suicide attempts among adolescents.[8,25,30] Sometimes substance abuse is an attempt to deal with social alienation, but substance abuse may exacerbate the very problem it is intended to solve when it further disrupts family relationships and friendships. Substance abuse can increase delinquent and criminal behavior (when adolescents steal to obtain money for drugs, for example), but often other antisocial behaviors predate the initiation of substance use.[30]

The fact that so many adolescent problems are interrelated and the reality that many are associated with family problems suggests that solutions will require concerted and collaborative efforts. Many of the adolescents in juvenile corrections emerge from a social milieu replete with violence and despair. Individual families and society as a whole must make a renewed commitment to children. Young people need to be reared in an environment where they are protected, respected, and valued, in order that they learn to value themselves, respect their needs and the needs of others, and adopt healthy and responsible behaviors.[7]

Previous research has identified certain aspects of interventions and treatment programs which are effective with incarcerated or detained adolescents. Successful programs include comprehensive assessments which address substance abuse as well as other behavioral problems and environmental risk factors. Short-term and long-term success has been demonstrated by programs which are tailored to the individual and incorporate therapy or other strategies directed toward solving multiple problems.[31,32] While increasing services to adolescents in correctional facilities may be costly, it is likely that such services would pay for themselves by reducing recidivism. A decrease in future antisocial behavior has been linked to therapy that increases the adolescent's awareness of the motivations for substance abuse and delinquency and the context in which these actions occur.[33] Successful programs also must include an adequate plan for follow-up support when the adolescent returns to the community.[34]

Recommendations

The results of the Minnesota Student Survey of adolescents in corrections have implications for averting juvenile corrections placements. Clearly, earlier detection and effective interventions for children and families traumatized by physical and sexual abuse are essential. Improved access to professional assessments and services, for all families without limits imposed by financial resources, also would help to reduce the likelihood of serious behavioral problems among youth. Collaborative efforts now underway between county social service agencies, community mental health centers, and schools are an important step in this direction.

Survey results also suggest improvements to services for adolescents in the correctional system which may reduce recidivism and return youth to the community more prepared to cope with the adversities they confront. Specific recommendations include:

- Substance abuse assessment and treatment needs to be available to all juvenile offenders and become a regular part of services available for youth in correctional settings. Adequate public funds should be available for these services given the very likely reduction in future criminal activity associated with successful substance abuse treatment. Early release from corrections contingent on successful substance abuse treatment also should be explored.

- Assessments of sexual and physical abuse and psychological problems should become part of the assessment process for juvenile offenders, with mental health care available as needed.

- Assessments should be comprehensive and tailored to individual adolescents.

- Therapeutic services should involve youth in identifying the perceived benefits of gang involvement, and release plans which incorporate safer and healthier alternatives should be developed.

- Programs serving adolescents in corrections should capitalize on the high self-esteem and other assets reported by many youth. Programs could provide contacts with mentors who will spend time helping adolescents develop skills.

- Parents of adolescents in corrections should be educated about the implementation and value of rule-setting within their households prior to the youth's return to the home.

- Referrals for assessments of parental substance abuse problems should be available as part of the assessment of juveniles in correctional settings. Treatment for substance problems in parents of juveniles is likely to have a substantial impact on the adolescent's behavior and reduce the likelihood of the adolescent's future substance abuse and other antisocial problems.

- All services for adolescents in corrections need to be sensitive and responsive to their diverse cultural backgrounds and the different developmental needs of males and females.

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